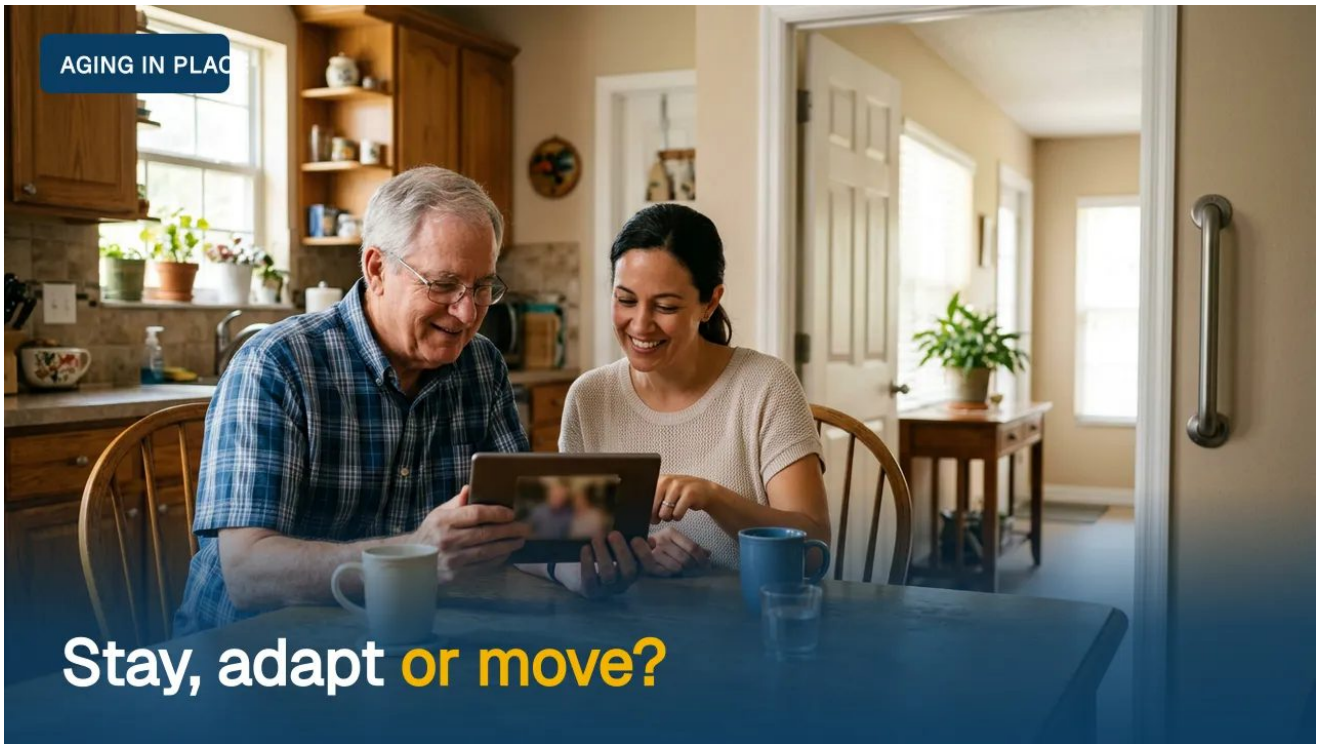
AGING IN PLACE

Can my parent age in place in their current home?

By Russ L'HommeDieu, DPT, ATP, CFPS · Doctor of Physical Therapy, RESNA Assistive Technology Professional, Certified Fall Prevention Specialist · September 12, 2026



Often, yes, if the home can be adjusted to fit the person and the right help is in place. The answer depends less on age than on three things: how your parent moves and manages daily tasks, how well the house supports that, and who can step in when needed. An honest look at all three tells you whether to modify, add support, or start planning a move.

Most people want to stay

An AARP survey in 2024 found that 75 percent of adults 50 and older want to stay in their current home as they age. Many are already planning for it. Among those planning renovations, most expected bathroom changes such as grab bars and non-slip tile, and most expected mobility changes such as ramps or chairlifts.

The challenge is that most homes were not built for it. Harvard's Joint Center for Housing Studies found that fewer than 4 percent of U.S. homes combine a no-step entry, single-floor living, and halls and doors wide enough for a wheelchair.

Signs it is working

These are signs I look for as a clinician. They suggest the home and the person are still a good match:

- Your parent gets in and out of the house, bed, chair, toilet and shower without help or near-misses
- Meals, medications and bills are handled, even if with some help
- The house is reasonably clean and the refrigerator has fresh food
- No falls, or one fall with a clear cause that has been fixed
- Your parent goes out, sees people and has someone nearby to call
- Changes such as grab bars or a shower chair are accepted and used

Signs it may not be working

- Repeated falls, or a fall where your parent could not get up
- Sleeping in a recliner because the bed or bedroom is too hard to reach
- Avoiding bathing because the tub is frightening
- Living on one floor of a two-story house and never using the other
- Missed medications, spoiled food, unopened mail or unpaid bills
- Stairs at every entrance and no practical place for a ramp
- Needs that exceed what family and paid help can realistically cover

One of these does not mean your parent must move. Several together mean it is time for a closer look.

What makes aging in place work

The strongest evidence comes from a program called CAPABLE, developed at Johns Hopkins. An occupational therapist, a nurse and a handyman visited older adults at home over about five months. The team worked on the goals each person chose and made small home repairs and changes. In a randomized trial, difficulty with daily activities dropped by about 30 percent. The program cost roughly $2,825 per person.

The lesson is that home changes work best when they follow a clinical look at the person. Grab bars, lighting and railings matter. So does practicing how to use them, and matching them to the specific tasks your parent struggles with.

What an assessment answers

A home safety assessment by a physical or occupational therapist can answer the practical questions families argue about:

1. Can this home be made safe for how my parent moves today?
2. What would it cost in changes, and which ones matter most?
3. What will probably be needed in the next few years?
4. Is there a point where the home will no longer work, and what would that look like?

Those answers let the family plan instead of react after a fall.

How we help

A Home Safety Visit includes a clinical look at your parent, a room-by-room review of the home, a photo report and a prioritized hazard list. If your parent is considering a move, our Right Home Assessment looks at a new home before you buy. Every service starts with an Initial Consultation, a 30-minute phone call. Current prices are on our pricing page.

Sources

AARP. 2024 Home and Community Preferences Survey

Scheckler S. (2022). Accessibility of the U.S. housing stock. Harvard Joint Center for Housing Studies.

Szanton SL, et al. (2019). Effect of a biobehavioral environmental approach on disability among low-income older adults. JAMA Internal Medicine.

American Occupational Therapy Association. Home modifications: key community partnerships

Clemson L, et al. (2023). Environmental interventions for preventing falls in older people living in the community. Cochrane Database of Systematic Reviews.

Want a plan for your own home?

Every service starts with an Initial Consultation, a 30-minute phone call with Dr. L'HommeDieu.

Book at homesafety.solutions